

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Value In Electing Women Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Chelsea Arnone**

Mailing Address 48695 Howard Drive

City State Zip Code  
Lawrence MI 49064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Health Group, LLC

Occupation  
Health Policy Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.0

Date of Receipt

MM / DD / YYYY  
02 / 21 / 2014

**Transaction ID : 1394651447606**

Amount of Each Receipt this Period

500.0

Credit Card

Full Name (Last, First, Middle Initial)

## **B. Susan Brackin Hirschmann**

Mailing Address 4052 Seminary Rd

City State Zip Code  
Alexandria VA 22304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Williams & Jensen PLLC

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.0

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2014

**Transaction ID : 1394651937213**

Amount of Each Receipt this Period

500.0

Credit Card

Full Name (Last, First, Middle Initial)

## **C. Lucia Lebens**

Mailing Address 161 Barrett Place

City State Zip Code  
Alexandria VA 22304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ACA International

Occupation  
Director Federal Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.0

Date of Receipt

MM / DD / YYYY  
02 / 24 / 2014

**Transaction ID : 1395253141766**

Amount of Each Receipt this Period

250.0

Credit Card

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00